

ISSUE SLIP STAPLE AREA (For additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	1-29-01
FORMALITY REVIEW	MD	K9H	02/02/01
RESPONSE FORMALITY REVIEW	TZ	JL947	07/02/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	0-15
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Best Available Copy

If more than 150 claims or 10 actions  
 staple additional sheet here

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